FRANKLIN COUNTY BUILDING PERMIT APPLICATION FOR ACCESSORY USE/ADDITION/MISCELLANEOUS

(For Office Use Only)

FEE\$ ZONE	PROPOSED USE	,	PERMIT #	FINE \$
FLOOD PLAIN Y OR N		·		en e
(Please Fill-in)	OW	NER INFORMATI	ON .	
NAME		DDRESS		
CITY	ST	ZIP	PHONE#	
		DER INFORMAT		
NAME	ADDRESS			(OR SAME AS OWNER)
	ST		•	Circle
	, DESCR	IPTION OF PROI	PERTY	
TOWNSHIP OR CORP				LOT
	OWNSHIP# RAN	D.		
TAX BILL ID#		PARCEI	LOCATION	
	DESCR	UPTION OF BUIL	DING	
ESTIMATED COST \$	TYPE (OF ROOM ADDITI	ON	
ADDITION SIZE	WALL HEIGHT	TYPE OF FOUN	DATION (Circle) CRAWL	, BASEMENT OR SLAB
GARAGE SIZEbath? (Circle) Yes or No	WALL HEIGHT	Is the building goin	g to have electric? Yes or No	Is the building going to have a
POLE BARN SIZE going to have a bathroom? (0	WALL HEIGHT	Is the building	going to have electric? (Circle	Yes or No Is the building
ACCESSORY USE SIZE building going to have a bathr	WALL HEIGH oom? (Circle) Yes or No	T Is the		c? (Circle) Yes or No Is the
PORCH SIŹE	POOL SIZE DEG	CK SIZE	REMODELING	SIGN
* ALL OF THE FOLLOWI	NG INFORMATION MUST	BE IN ORDER FO	R A PERMIT TO BE ISSU	ED.
layout, floor plan and smoke * SITE PLAN showing location site. Sample attached * You must have approval in w. * Property Owners Association * Pole Barn, Garages & Access \$50.00, in-ground pools are \$2	S must be submitted with application detector location; all of these item on of proposed buildings or any exprising if your property is located in approval in writing, if it applies sory Uses are \$75.00 plus \$25.00 200.00 and additions are \$200.00 (se, (A) Intent, (5); (d) At no times	s listed will not apply cisting building and d an incorporated towr s (ex. Lakeshore Reso with electric; above § plus \$5.00 per every	to every permit, but please get istances from property lines, de (Brookville, Laurel, Mt. Carmet or New Fairfield). ground pools are \$75.00; Poro 100 sq. ft. and includes attache	all items in order that does apply. rive, septic location and well lel, Oldenburg and Cedar Grove). Thes are \$75.00 and decks are led garages.
Signature of Applicant or Own	ner	I	Date	
Print				

Addressing Guidelines for Building Permit Applications

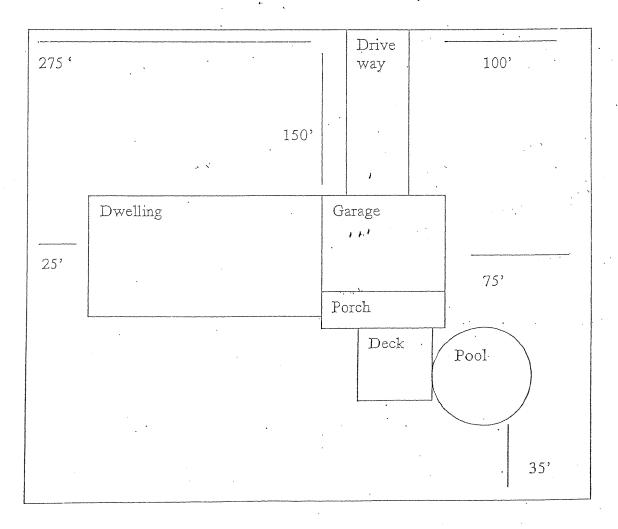
New Addresses are assigned by the Surveyor's Office when a building permit is issued. The street numbers we assign are intended to be consistent with 9-1-1 system of addressing. This system of numbering makes it easier for emergency personnel to find your house in the event of a fire, accident, etc.

In order to assign an accurate number for your house we need to know where your driveway is located. For a building tract with a new property survey, measuring along the road with a tape from one of your property lines is usually enough (be sure to include a copy of your survey) information for our office to assign a new address. You may also be able to acquire the new address location by measuring from a neighbors (possible on either side) driveway. If you have any questions contact the Franklin County Surveyor's Office at (765)647-5651. Thank you.

Sample Site Plan

Any person, who shall make application for an Improvement Location Permit shall, at the time of making such application furnish, a site plan or development plan of real estate upon which said application for an Improvement Location if made a lease five (5) days prior to the issuance of said Improvement Location, which five (5) days period may be waived said site plan shall be drawn on the reverse side of this form and shall not be drawn to scale showing the following items shown;

Figure 1



METER CHECK APPLICATION

Owner:	Receipt No. :			
Mailing Address:				
	Date:			
Phone No.:	Zoning Des			
Contractor:				
Directions to site:				
Job Address:	Date Inspected:			
Released by:	Date Released:			
Released to:	New Service, Upgrade or Reconnecting			
Utility:	Size of Service:			
Applicant's or Agent's Signature	_			
Payment type: check # cash				
Date Paid:				
Contacted by :				
To be paid by:				
Make checks payable to: Franklin County Area I Address: 1010 Franklin Avenue Brookville, IN 47012 Phone: 765-647-5731 Thank you! Address: 1010 Franklin County Area I Address: 1010 Franklin Avenue Brookville, IN 47012 Phone: 765-647-3000	Planning			

TYPE OF PETITION: REZON	VE zone	FEE \$	DATE	
FLOOD PLAIN; YES OR NO				
		JER INFORMATIO		
NAME		ADDRESS		
CITY	STZIP	PHO	NE	
	APPLICANT INI	FORMATION (If di	fferent than owner)	
NAME		ADDRESS		
CITY	STZII	PPHON	E	
	DESCRI	PTION OF PROP	ERTY	
TWP OR CORP		SUBDIVISION	~	
LOTSECTION #	TOWNSHIP #	#RANGE	#ACI	RES
LOCATION STREET / ROAD				
DESCRIPTION OF PETITION _				

PETITION MUST BE FILE	D ON OR BEFOR	RE	. 20	AND THE BELOW
UNDERLINED ITEMS MU	JST BE SUBMIT	TED WITH THE	FEE.	
COPY OF SURVEY SEPTIC APPROVAL - HEALT WATER AVAILABILITY SIGNATURE FROM SOIL & DEVELOPMENT PLAN PICTURES OF MOBILE HON AERIAL PHOTO - COUNTY DOCTOR'S STATEMENT - ST	WATER CONSERV. ME - INSIDE & OUTS ASSESSOR'S OFFICE TATING YOUR CON	ATION DISTRICT SIDE		
* THE GREEN CARDS AN ON DATE YOUR APPLICATI				
THE HEARING WILL BE I			, 20 AT	' 7:00 P.M. *******
A <u>rezone</u> petition may be filed join	itly by adjoining prope	erties.		
NOTE: <u>under the frankli</u> returnable states; no returnable to the appi	PART OF ANY F	ILING FEE PAID PU	ION 80.48, FILING F RSUANT TO TH	EE& FORMS, (F) FEES NOT HS SECTION SHALL BE
Signature		Date		
Print				

TYPE OF	PETITION: SPECIA	AL EXCEPT	TION	ZONE_	FEE\$		_DATE_	
	PLAIN; YES OR NO							
		(INWC	ER INFO	RMATION	J		
NAME _				ADDRE	SS			
		APPLICANT						
NAME_								
CITY		ST	ZIP		PHONE			
					F PROPER			
TWP OR	CORP			SUE	BDIVISION			
LOT	SECTION #	TOWN	SHIP#		RANGE #		ACRES	
LOCATIO	ON STREET / ROAD				PA	ARCEL#	,	
	TION OF PETITION _							
**	******	******	****	*****	*****	******	******	*****
PETITIO	ON MUST BE FILE	D ON OR B	EFOR	E	×		. 20	AND THE BELOW
	RLINED ITEMS MU						, 20	
COPY SEPTIC WATE SIGNA DEVEL PICTU AERIA DOCTO	LAN - MUST BE HAND OF SURVEY C APPROVAL - HEAL R AVAILABILITY TURE FROM SOIL & OPMENT PLAN RES OF MOBILE HON L PHOTO - COUNTY OR'S STATEMENT - STORY	TH DEPARTMI WATER CON ME - INSIDE & ASSESSOR'S C TATING YOUR	ENT (76 SERVA OUTSI OFFICE R CONI	55)647-432 A TION DI DE	2 STRICT	STANCES F	ROM THE	PROPERTY LINES
* THE C	GREEN CARDS AN	ND PROOF	OF PU	BLICAT	TION MUS	ST BE SUI	BMITTE	D TO OUR OFFICE
ON	***************************************		, 20_	•	IF THE ITE	EMS ARE	NOT SU	BMITTED BY THIS
DATE Y	OUR APPLICAT	ION <u>WILL</u> N	<u> 10T</u> B	E HEAF	RD, DUE T	O INSUF	FICIENT	APPLICATION.
THE HE	EARING WILL BE	HELD ON _ ******	****	*****	*****	, 20 ******	AT 7:0	00 P.M. *******
A rezone	petition may be filed join	ntly by adjoining	g propei	rties.				
RETURN	UNDER THE FRANKL ABLE STATES; NO ABLE TO THE APP	PART OF A	NY FII	LING FEE	ODE, SECTIO E PAID PURS	N 80.48, FII SUANT T	LING FEE& O THIS	FORMS, (F) FEES NOT SECTION SHALL BE
Signature_				Date		-		
Print								

TYPE OF PETITION: VARIA	NCE ZONE	FEE \$	DATE
FLOOD PLAIN; YES OR NO			
		INFORMATION	
NAME	A	DDRESS	
CITY	STZIP	PHONE	
	APPLICANT INFOR		
NAME	A	DDRESS	
CITY	STZIP	PHONE_	
		ON OF PROPERTY	
TWP OR CORP		SUBDIVISION	
LOTSECTION #	TOWNSHIP #	RANGE #	ACRES
LOCATION STREET / ROAD		PARCI	EL#
DESCRIPTION OF PETITION _			
*******	******	*******	***********
*****			, 20AND THE BELOW
COPY OF SURVEY SEPTIC APPROVAL - HEALT WATER AVAILABILITY SIGNATURE FROM SOIL & DEVELOPMENT PLAN	EWAY) - COUNTY HIGHY OR MOBILE HOME D DRAWN TO SHOW AL TH DEPARTMENT (765)64 WATER CONSERVATION	WAY DEPARTMENT (76 L BUILDINGS & DISTA 47-4322	55)647-4271 NCES FROM THE PROPERTY LINES
PICTURES OF MOBILE HOM AERIAL PHOTO - COUNTY A DOCTOR'S STATEMENT- ST COPY OF THE TITLE TO TH	ASSESSOR'S OFFICE ΓΑΤΙΝG YOUR CONDITION	ON OR THEIR'S	
* THE GREEN CARDS AN ON DATE YOUR APPLICATI	ID PROOF OF PUBL , 20 ION <u>WILL NOT</u> BE H	ICATION MUST E IF THE ITEMS HEARD, DUE TO I	BE SUBMITTED TO OUR OFFICE ARE NOT SUBMITTED BY THIS NSUFFICIENT APPLICATION.
ΓHE HEARING WILL BE I	HELD ON	*******	20ATP.M. *************
A <u>rezone</u> petition may be filed join	ntly by adjoining properties.	•	
NOTE: <u>under the frankli</u> returnable states; no returnable to the appi	PART OF ANY FILING	G FEE PAID PURSUA	0.48, FILING FEE& FORMS, (F) FEES NOT NT TO THIS SECTION SHALL BE
Signature	Dat	e	
).int			

TYPE OF PETITION: SUBDIVISION	ON zone	FEE \$	DATE	
FLOOD PLAIN; YES OR NO	CASE #		-	
	OWNER INF	ORMATION		
NAME	ADDI	RESS		
CITYS	TZIP	PHONE		
	LICANT INFORMA			
NAME	ADDI	RESS		
CITY	STZIP	PHONE		
	DESCRIPTION	OF PROPERTY		
TWP OR CORP	S	UBDIVISION		
LOTSECTION #	_TOWNSHIP #	RANGE #	ACRES	S_ ;
LOCATION STREET / ROAD		PARCE	L#	
DESCRIPTION OF PETITION				
************	*******	*******	*******	*****
PETITION MUST BE FILED O	N OR BEFORE		, 20	AND THE BELOW
UNDERLINED ITEMS MUST				
COPY OF SURVEY SEPTIC APPROVAL - HEALTH D WATER AVAILABILITY SIGNATURE FROM SOIL & WAT DEVELOPMENT PLAN PICTURES OF MOBILE HOME - I AERIAL PHOTO - COUNTY ASSE DOCTOR'S STATEMENT - STATI COPY OF THE TITLE TO THE M	TER CONSERVATION INSIDE & OUTSIDE ESSOR'S OFFICE ING YOUR CONDITION	DISTRICT ,		
* THE GREEN CARDS AND F ON DATE YOUR APPLICATION	PROOF OF PUBLIC , 20 WILL NOT BE HE	ATION MUST E . IF THE ITEMS ARD, DUE TO I	BE SUBMITT S ARE NOT S NSUFFICIEN	TED TO OUR OFFICE UBMITTED BY THIS NT APPLICATION.
THE HEARING WILL BE HEL	D ON	, *******	, 20AT ?	7:00 P.M. *******
A rezone petition may be filed jointly b	y adjoining properties.			
NOTE: <u>UNDER THE FRANKLIN CORTURNABLE STATES</u> ; NO PARETURNABLE TO THE APPLICA	RT OF ANY FILING	CODE, SECTION 80 FEE PAID PURSUA	0.48, FILING FE ANT TO THI	E& FORMS, (F) FEES NOT IS SECTION SHALL BE
Signature	Date _			
Print				

SECTION 22 BUILDING FEE RATE SCHEDULE

Type of Construction	Fees
Single Family Dwelling (includes Modulars)	\$300.00 plus \$5.00 per 100 square feet over
	960 square feet
Two-Family Dwellings	\$500.00 plus \$5.00 per 100 square feet
Multi-Family Dwellings	\$600.00 plus \$5.00 per square feet
Manufactured Homes (double wides, etc.)	\$250.00 plus \$100.00 if basement
Attached Garages	\$200.00
In-Ground Pools	\$200.00
Above Ground Pools	\$75.00
Residential Additions	\$200.00, plus \$5.00 per 100 square feet
Attached & Unenclosed Lean-to's and Decks	\$50.00
All Commercial & Commercial Additions	\$500.00 up to 10,000 square feet, plus \$5.00
. *	plus 100 square feet; if over 10,000 square
	feet \$1,000.00 plus \$5.00 per 100 square feet
	not to exceed the fee of \$6,500.00
Churches or Non-Profit Organizations	\$250.00
Accessory Buildings (pole barn, porch, garage,	\$75.00 plus \$25.00 if new meter and
pole barn addition)	plumbing
Temporary Structures	\$50.00, plus \$25.00 for electric
Reinspection Fees	\$45.00
Meter Checks	\$45.00
Signs	\$50.00

ARTICLE VI. EFFECTIVE DATE

SECTION 23. EFFECTIVE DATE. This Building Ordinance shall be in full force and effect from and after the date on which both of the following have occurred.

1. The County has adopted this ordin	ance.
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2. The Fire Prevention and Building Safety Commission of Indiana has approved of this ordinance as required by IC 22-13-2-5.

(Authentication o	f enactment according to lo	ocal style)
Approved this Building Safety C	day of Commission of the State of	, 20, by the Fire Prevention and Indiana.